



Supplemental Application Data Sheet

APPLICATION INFORMATION

Application Number::	10719319
Filing Date::	11/21/03
Application Type::	Regular
Subject Matter::	Utility
Title::	Copper Modified Catalysts for Oxidative Dehydrogenation
Attorney Docket Number::	1856-24700(9481.0-01)
Suggested Drawing Figure::	1
Total Drawing Sheets::	1

APPLICANT INFORMATION

Applicant Authority type::	Inventor
Primary Citizenship	
Country::	P.R. China
Status::	Full Capacity
Given Name::	Zhen
Family Name::	Chen
Name Suffix::	
City of Residence::	Ponca City
State or Province of Residence::	OK
Country of Residence::	US
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City of mailing address::	Ponca City
State or Province of mailing address::	OK
Country of mailing address::	US
Postal or Zip Code of mailing address::	74604

Applicant Authority type::	Inventor
Primary Citizenship	
Country::	US
Status::	Full Capacity
Given Name::	Steven R.
Family Name::	McDonald
Name Suffix::	
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State or Province of Residence::	OK
Country of Residence::	US
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City of mailing address::	Ponca City
State or Province of mailing address::	OK
Country of mailing address::	US
Postal or Zip Code of mailing address::	74604
Applicant Authority type::	Inventor
Primary Citizenship	
Country::	US
Status::	Full Capacity
Given Name::	Shang Y.
Family Name::	Chen
Name Suffix::	
City of Residence::	Oklahoma City
State or Province of Residence::	OK
Country of Residence::	US
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State or Province of	

mailing address:: OK
Country of mailing
address:: US
Postal or Zip Code of
mailing address:: 73120

Applicant Authority type:: Inventor
Primary Citizenship
Country:: France
Status:: Full Capacity
Given Name:: Stephan
Family Name:: Basso
Name Suffix::
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State or Province of Residence::
Country of Residence:: France
Street of mailing address:: 9 Rue Du Waldenbourg
City of mailing address:: Eguisheim
State or Province of
mailing address::
Country of mailing
address:: France
Postal or Zip Code of
mailing address:: 68420

Applicant Authority type:: Inventor
Primary Citizenship
Country:: US
Status:: Full Capacity
Given Name:: Charles R.
Family Name:: Rapier
Name Suffix::

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<u>Status::</u>	<u>Full Capacity</u>
<u>Given Name::</u>	<u>Angela R.</u>
<u>Family Name::</u>	<u>Bailey-Rivers</u>
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<u>Applicant Authority type::</u>	<u>Inventor</u>
<u>Primary Citizenship</u>	
<u>Country::</u>	<u>Turkey</u>
<u>Status::</u>	<u>Full Capacity</u>
<u>Given Name::</u>	<u>Cemal</u>
<u>Family Name::</u>	<u>Ercan</u>
<u>Name Suffix::</u>	
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<u>Country of mailing</u>	
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CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 31889

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Representative Customer Number:: 31889

ASSIGNEE INFORMATION

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